

POWER OF ATTORNEY AND CORRESPONDENCE ADDRESS INDICATION FORM	Application Number:		10/511,882	
	Filing Date:		October 19, 2004	
	First Named Inventor:		Bodo Kuklinski	
	Art Unit:		1657	
	Examiner Name:		SCHUBERG, LAURA J.	
	Attorney Docket Number:		SONN:057US	

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 32425

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE OF APPLICANT OR ASSIGNEE OF RECORD			
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Date	18.11.2010		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 form(s) are submitted.